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Exclusive: Dr. Mary Kelly Sutton Loses Medical License in New York for Writing Eight Vaccine Exemptions in California

In an exclusive interview with The Defender, Dr. Mary Kelly Sutton talked about losing her license in a third state, New York, after California and Massachusetts previously barred her over eight disputed vaccine exemptions. Sutton argued her judgment and then-applicable laws were unlawfully misconstrued by an unelected administrative body.

By John-Michael Dumais

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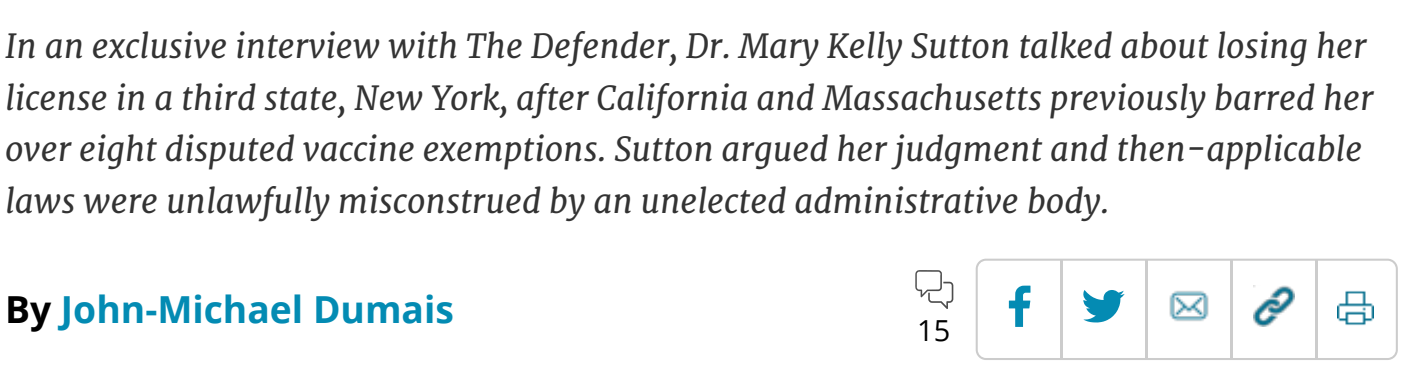

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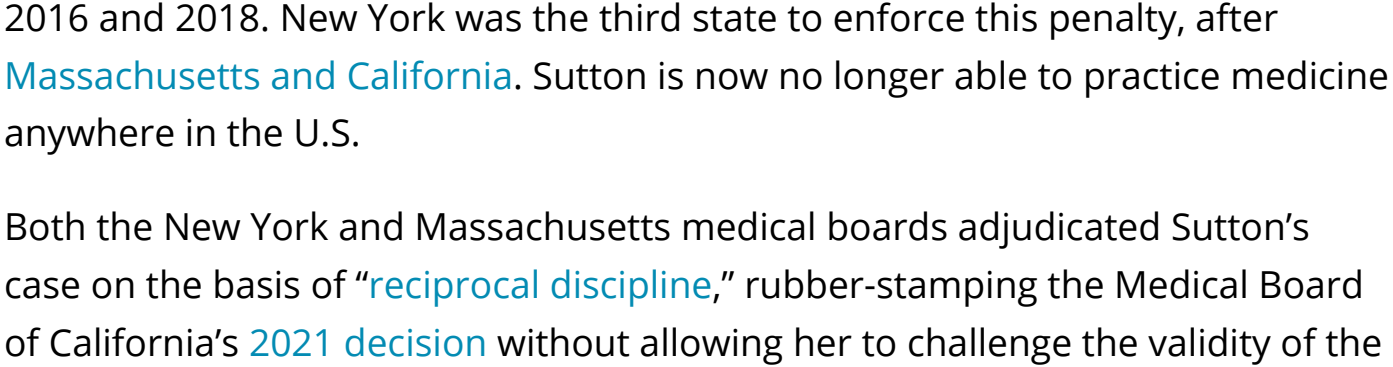
Dr. Mary Kelly Sutton (who goes by "Kelly") on Oct. 30 lost her license to practice medicine in New York for writing eight vaccine exemptions in California between 2016 and 2018. New York was the third state to enforce this penalty, after Massachusetts and California. Sutton is now no longer able to practice medicine anywhere in the U.S.

Both the New York and Massachusetts medical boards adjudicated Sutton's case on the basis of "reciprocal discipline," rubber-stamping the Medical Board of California's 2021 decision without allowing her to challenge the validity of the original findings.

Reciprocal discipline avoids the time and costs of relitigating. Therefore, like the Massachusetts Board of Medicine hearing last July, the October hearing in New York was just theater and the board never intended to allow Sutton to defend herself.

Instead, the New York board maintained that the purpose of the hearing was limited to determining what penalty should apply to Sutton's state license in light of the findings already established in California.



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Medical Board of California misinterpreted the law

Sutton, an integrative medicine physician practicing since the early 1970s, told The Defender that the Medical Board of California misinterpreted the law when it determined she violated "standards of care" when writing the vaccine exemptions.

Those exemption-specific standards — which came into effect in 2016 via Senate Bill (SB) 277, a California bill that stripped parents of the personal belief exemption for rejecting vaccines for their children — only stated it was up to the physician to decide on a medical exemption based on the needs of the child.

However, in 2019, California passed two more bills — SB 276 and SB 714 — designed to make vaccine exemptions even more difficult to acquire.

Specifically, when a doctor writes more than five medical exemptions per year (as of Jan. 1, 2020) or a school's immunization rate falls below 95%, the California Department of Public Health (CPDH) has the right to review the medical exemptions.

Physicians since January 2021 are also required to use a standardized electronic exemption form submitted to a statewide database, and CPDH may revoke exemptions that do not conform to vaccination guidelines established by the Centers for Disease Control and Prevention (CDC) and its Advisory Committee on Immunization Practices (ACIP) and by the American Academy of Pediatrics.

Sutton claimed the Medical Board of California applied its own definition of "standards of care," in direct contravention to the standard established by SB 277.

"In California, any time a standard of care is written into statutory law, it is more preeminent than a community standard of care that is just held among the general opinion of doctors in practice," she said.

Sutton believes the Medical Board of California was also applying laws derived from SB 276 and SB 714 that went into effect well after the date she wrote the exemptions.

The CDC's and ACIP's vaccine recommendations do not constitute mandates or requirements. According to Sutton, during the lobbying phase of SB 277, a doctor called ACIP and asked whether its recommendations should be considered mandates, and was told that they were only guidelines.

The ACIP guidelines do not mention the word "exemption," according to Sutton, nor were the guidelines mentioned in SB 277.

"That's the way guidelines have always been used in standards of care," Sutton said, calling them "indicators, supports, references — but not mandates."

Sutton said the mood of medicine is shifting away from a doctor exercising his or her own training and experienced judgment towards doing what the standards and guidelines say.

"This is decidedly against the quality of medicine because there's no freedom to individualize for the patient," she said.

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Dissecting the California case

The California board revoked Sutton's license for "gross negligence" and "repeated negligent acts" in issuing permanent vaccine exemptions for eight pediatric patients, saying the exemptions did not comply with standards of care and vaccine guidelines at the time.

The board's sole expert witness, Dr. Deborah Lehman, infectious disease physician at the University of California, Los Angeles, dismissed Sutton's claim that SB 277 clearly articulated standards of care regarding exemptions, saying those were not the "community standard of care," Sutton recounted.

Sutton explained:

> "SB 277 was brief and direct to the point. It said that if a child who is required to have vaccines receives a note from a physician stating that it is in the child's best interests to not be vaccinated, then that suffices to fulfill the requirement and the child can go to school without having the required vaccines. The deciding factor is the physician's discretion."

The relevant clause from the bill states:

> "If the parent or guardian files with the governing authority a written statement by a licensed physician to the effect that the physical condition of the child is such, or medical circumstances relating to the child are such, that immunization is not considered safe, indicating the specific nature and probable duration of the medical condition or circumstances, including, but not limited to, family medical history, for which the physician does not recommend immunization, that child shall be exempt from the requirements."

Lehman said doctors must only grant an exemption when there is a contraindication to a vaccine and at no other time.

Lehman claimed the standard of care was determined by whether another physician would treat the medical issue the same or similarly. However, according to Sutton, she omitted the all-important phrase "in the same community."

In the integrative medicine community in which Sutton practices, it is common for patients to receive more individualized treatments rather than one-size-fits-all approaches.

"It was kind of a force-of-personality situation that was successful in the setting of the courtroom hearing at the administrative level," Sutton said. "And the board witness prevailed upon the judge to believe that the law had no meaning and that community opinion was higher."

The California board also questioned Sutton's decision not to request patients' medical files or perform physicals in the cases for which she wrote exemptions.

"If I required a physical exam for every vaccine exemption, I could be accused of 'padding the bill' because the physical exam contributes nothing to the decision about the risk for a vaccine injury," Sutton said.

Instead, Sutton's process was primarily to review patient histories to understand if the child or a family member had suffered a negative reaction to vaccines.

She said:

> "From my understanding and from the group of physicians that I worked with at the time — Physicians for Informed Consent — the risk factors for vaccine injury lie completely in the story of what's happened to the child when they have had vaccines and what has happened to their blood relatives when those people had vaccines."

After the passage of SB 277, Sutton said there was "a great deal of conversation" among doctors about how the law could be read and interpreted and how exemptions could be constructed rationally based on the scientific literature.

That literature showed several different areas of concern around vaccinations, including "The aluminum contained in vaccines can trigger neurologic issues and autoimmune disease," Sutton said, adding, "There is the question of regression after vaccines and neurodevelopmental delays such as autism."

"There's also a higher risk of allergies, and then there's the immediate reactions where a person collapses or has a seizure after a vaccine," she said.

"A doctor has to make an extra effort in order to understand the historical pattern of vaccine reactions that would indicate risk of vaccine injury, or how to diagnose mitochondrial dysfunction," Sutton said.

During the California hearing, Sutton shared extensive scientific citations supporting her medical decision-making, including research by Dr. Chris Exley on the dangers of aluminum in vaccines.

She told the board that it was neither intelligent nor humane to force a family to continue to vaccinate after one of their children had already died or been injured by a vaccine, and shared her clinical observation that unvaccinated patients are healthier than those who are vaccinated.

The California board also claimed Sutton neglected to provide informed consent to her patients requesting vaccine exemptions.

Sutton was uncertain exactly what the board meant here but surmised it was saying she did not adequately highlight the diseases that could develop if the parents failed to vaccinate their children.

Deeming the real issue with informed consent to be advising patients about the potential harms of vaccination, Sutton said, "I don't think I repeated the CDC bylines." Instead, she believed the parents who came to her for exemptions were already "more than aware" of the risks of childhood diseases.

From her point of view, there was already enough vaccine promotion happening with mainstream media and schools "echoing over and over" how "vastly dangerous chickenpox" and the other childhood diseases were.

The California board's concern about Sutton not requesting previous medical records is based on the notion of "Don't trust a single word the patient says," Sutton said, an attitude that necessitates getting "every documentation" about adverse vaccine reactions before making a decision.

"That's not the way medicine works," Sutton said. "But that's what was expected in terms of a medical exemption interview. It's like building a legal case instead of a medical case."

Further wrongdoing was implied by the California board in pointing out that a number of the exemptions Sutton wrote were for patients for whom she was not the primary care provider.

"That is implying that the primary care doctor knows the patient best," Sutton said. "And that is good in a lot of ways, but it can be a problem for the patient if it's a large practice that has been forbidden to give vaccine exemptions."

Sutton said that if a patient's need cannot be addressed by that group, even if it's their primary care group, then it is akin to patient abandonment.

SB 277, the law in effect during the period Sutton wrote the exemptions, never had a requirement that exemptions be written by the primary care physician, or even by a pediatrician or pediatric infectious disease expert, according to Sutton.

"So their [Medical Board of California's] statements were beyond the law and that's what they were enforcing against doctors," she said.

Although the board improperly focused on laws that went into effect in 2019 and later, Sutton said, "That very argument could not be persuasively made by the attorneys at the time."

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Board expert: 'Science has been decided' on vaccine risks

The Medical Board of California conducted a three-day "trial" for Sutton in June 2021 in an administrative court with a single judge and no right to a jury.

Three experts spoke on behalf of Sutton, while Lehman, the board's single expert, testified against her.

Lehman lacked basic knowledge of vaccine risks and stated that all doctors should follow the CDC's vaccine schedule.

When asked to quantify the risk of vaccine injuries, Lehman said, "I don't need to cite articles in my report, because the science has been decided … If you want answers to these questions, I would refer you to the CDC."

After denying any knowledge of Dr. Peter Aaby's more than 400 articles on PubMed analyzing vaccine dangers, Lehman characterized the journal as "low impact" and Aaby as "anti-vax."

Sutton's witnesses were Dr. Andrew Zimmerman, pediatric neurologist, Dr. James Neuenschwander, family physician with vaccine expertise and Dr. LeTrinh Hoang, integrative medicine pediatrician.

They skillfully articulated the heterodox perspectives on vaccine dangers and referenced a number of recent studies on vaccine adverse effects, while noting the lack of data on vaccine safety or government studies comparing health outcomes for vaccinated versus unvaccinated individuals.

"And on this very little evidence, people like the board expert are proclaiming to the high heavens these are safe and effective," Sutton said. "All of these other concerns are irrelevant."

Administrative court structure promotes 'raw power'

In Sutton's interactions with California, Massachusetts and New York, she observed a notable lack of due process when compared with civil and criminal courts.

In the proceedings with the Massachusetts board, one of the documents filed against her did not list any specific complaints, making it difficult for Sutton to defend herself. "I had to intuit what they were complaining about and then make up the answers," she said.

When she brought this shortcoming to the magistrate's attention, he confirmed that such detail is not required in administrative courts.

"The structure of the administrative-level courts promotes the raw power that's exercised by the medical boards," Sutton said, adding, "It's not an exercise within the law and it doesn't benefit the people, but only the administrative state itself."

Sutton mentioned the Federation of State Medical Boards, which coordinates all of the medical boards in the U.S., sent out warnings to doctors about misinformation, masks, vaccines and exemptions related to COVID-19, she said.

"It's a private, unelected group that's been around for over 100 years," she said. "It's not visibly related to any government entity."

Together with its partner agency, the International Association of Medical Regulatory Authorities, it forms an integral part of the administrative state that is undermining the doctor-patient relationship and helping to delicense doctors like Sutton.

Sutton said, "They are both in the same building at the same address in Euless, Texas. So there is a centralized organ to control medical boards around the world, which means controlling doctors around the world."

"The coordination of COVID happened through organizations like that," she added.

Doctors incentivized to ignore vaccine injuries

Sutton said the financial incentives to vaccinate everyone within a medical practice discourage doctors from connecting adverse health outcomes to the vaccines.

"The Blue Cross Blue Shield Provider Incentive Program manual of 2016 listed a $400 bonus to the doctor for every two-year-old who was on the CDC vaccine schedule on time," she said, "as long as 63% of the practice was vaccinated."

"That's going to influence how you respond to a parent when they say, 'Johnny had a seizure after the MMR [measles-mumps-rubella] vaccine,'" Sutton said, adding, "Do you put that in the chart as an MMR vaccine reaction? Or do you say, 'Oh, it must be something else'?"

If a child has a febrile seizure, the doctor may well chalk it up to normal childhood fever rather than to a recent vaccination, Sutton said. "So we bias our own literature, our own notes, by the things that have been allowed in terms of financial incentives."

Sutton said financial incentives must be removed from medicine to restore its integrity.

"It's too much impact on physician judgment and motivations are not angelic," she said. "We're humans. So if somebody says 'If you just get 10 kids vaccinated you'll get $4000,' I'm going to be looking for those 10 kids to vaccinate and I'll be rationalizing to myself why that's okay."

Part of the problem, according to Sutton, is the state of the vaccine research literature that keeps doctors in the dark about the reality of adverse events.

"Vaccines have been very poorly studied," she said. "Some of them were approved, like hepatitis B, after only four days in one case and five days in another brand's case study — and it was approved for use in every newborn baby."

Other vaccines have been studied for as long as 42 days, but none long-term, which is necessary to see the development of autoimmune diseases like asthma that don't show up immediately after vaccination, she said.

"So the board expert could say there's no evidence that an adverse event is related to vaccines, which is not accurate because the evidence is there — but it's not in the evidence that the CDC accepts," Sutton said.

According to Sutton, the CDC "very carefully curates" the articles and studies it puts on its website to support its own policies. If a CDC-sponsored study shows adverse vaccine reactions, it won't appear on its website, she said.

Sutton shared the story of a former cardiologist at the Mayo Clinic who was training to do heart transplants when her 12-month-old daughter received an MMR vaccine and immediately regressed with severe autism. The woman had to leave the cardiology program and return to her home in Europe to care for her child.

Sutton said this woman claimed the CDC was researching a lot of topics, including that the rubella virus in the MMR vaccine persists in the body for a long time and results in granulomas in the case of immune-deficient children and sometimes immune-competent adults.

"This is not on the CDC website," Sutton said. "So if we look at the nature of the research supporting our vaccine program, we would be astonished and staggered and ashamed because we're injecting our children with very little evidence that these vaccines are safe or effective."

Financial incentives in research and drug approvals are also highly problematic, according to Sutton.

"Medicine is no longer medicine," she said. "It's become co-opted as another business. Sickness is more profitable than health and mandates are more profitable than choice."

"Otherwise, despite the efforts of individual doctors, the profession will be working against humanity and really becomes organized brutality instead of healthcare," Sutton said.

'The whole storm is not finished'

Sutton has exhausted or curtailed her administrative appeals with the states that have removed her license to practice medicine.

However, she and several doctors are planning to file a collective action in federal court in the spring. They are being supported by the nonprofit Physicians & Patients Reclaiming Medicine, where Sutton's story is currently featured.

Meanwhile, Sutton keeps in touch with many of her colleagues who have suffered the same fate.

"They are recouping from the reputational and financial losses after being attacked," she said. "So people don't quit, but there is a lot of sadness about medicine."

Sutton talked about the "diaspora" away from the state of California because of the discrimination that's happened to families who had a health concern about a vaccine for their child.

"There's been a lot of pain. So the whole storm is not finished," she said.

Lacking a medical license, Sutton has turned to offering health education for a small group of clients. They meet monthly over Zoom, and individuals can discuss their concerns privately with her. But she no longer diagnoses, treats or does physical exams.

Sutton is currently preparing a course about integrative medicine to present to a group of acupuncture students.

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John-Michael Dumais

John-Michael Dumais is a news editor for The Defender. He has been a writer and community organizer on a variety of issues, including the death penalty, war, health freedom and all things related to the COVID-19 pandemic.

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Best Newest Oldest

CastleConnell
2 days ago

She is being scapegoated. It is the doctors who need to take her courses. The state is now in charge of deciding what goes into a child's body, not the parent. It is an aspect of totalitarianism. Unfortunately, most parents don't object out of ignorance.

11 0 Reply • Share ›

Pilgrim → CastleConnell
2 days ago

Professional white lab/doctor coats are available for sale on Amazon for under $20.00.
What is happening to our highly qualified doctors is a travesty. We need them.

0 0 Reply • Share ›

UnionMember → CastleConnell
2 days ago

The more people see that it's a kangaroo court the better...
It's also happening on other aspects of the law, like the stupid Colorado ruling which was so subjective...

0 0 Reply • Share ›

trmlogan → UnionMember
2 days ago

But the majority of people are NOT seeing that it's a kangaroo court because the media isn't covering it! Thank goodness for CHD, but most of the people on here already know that vaccines are not "safe & effective."

0 0 Reply • Share ›

CastleConnell → UnionMember
2 days ago

yes

0 0 Reply • Share ›

AL MCKNIGHT
2 days ago

Couldn't Dr. Sutton sue the phony, biased medical boards? Hit them where it hurts! The medical boards should be eliminated or forced to be accountable to the public. I know Dr. Sutton, and she is a wonderful, caring physician.

5 0 Reply • Share ›

CastleConnell → AL MCKNIGHT
2 days ago

They always are, the wonderful, caring professionals, those are the ones who are targeted like Meryl Nass too.

2 0 Reply • Share ›

holisticpoet
2 days ago

It is becoming apparent that there is an enormous amount of control over physicians by requiring licensing. Big pharma controls most state health boards and through the members of the boards will not allow physicians to do their jobs as they see fit. Anything that goes against their profit machine, narrative, or long term agendas is met with revocation of licenses for the doctors that speak their minds. In my opinion most doctors are now just lapdogs for big pharma. This is an overwhelming reason that doctors should not be required to be licensed. Caveat emptor, let the buyer be ware if the doctor is good enough or not. I believe it to be a better system than the current monopoly we are currently dealing with.

4 0 Reply • Share ›

CastleConnell → holisticpoet
2 days ago

The whole licensing process means they keep the country deficient in the number of doctors needed for the population. Attractive pharma reps market drugs to docs who prescribe for pharma.

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GarySummers
2 days ago edited

Dr. Sutton True Courage, not owned by Big Pharma!
1.) "Scientists Detect Spike Protein From COVID Vaccination In Long COVID Patients"

The study, published Dec. 27 in the European Review for Medical and Pharmacological Sciences, found vaccine spike protein in two patients at least two months after receiving their second dose of a COVID-19 vaccine and viral spike protein in one subject who previously recovered from infection in a cohort of 81 patients with long COVID syndrome. Samples gathered from the unvaccinated control group were negative for spike protein.
https://www.zerohedge.com/c...

2.) "Review Shows COVID-19 Vaccines "Significantly" More Deadly Than Flu Shots: US Sen. Ron Johnson"

The review was conducted by the senator's staff and involved a certain level of assumption given that no publicly available data exist regarding how many flu vaccine doses were administered in the United States over the past 10 years.

Using the number of distributed doses to generate that figure, they found that the number of

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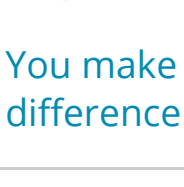

CHD Asks Appeals Court to Allow Lawsuit Challenging FDA's Authorization of COVID Shots for Kids to Move Forward

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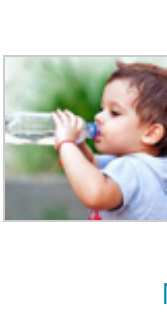

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deaths per million doses of the COVID-19 vaccines (25.5) far exceeded those estimated for the flu vaccine (0.46).
https://www.zerohedge.com/c...

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darlene
6 hours ago

This case and many others that threaten physicians for practicing informed consent, sets a dangerous precedent. Parents become desperate in their attempts to protect their children because of these laws. The Doctors practicing "do no harm" are punished even when the science and data are on their side. It is unbelievable that all these studies and real life analysis of patient data is completely ignored by these licensing boards.The result is let the children suffer the consequences in favor of Pharma and their multibillion dollar money machine, and punish anyone and anything that gets in the way. I hope Dr Sutton and numerous others can beat this. I hope someday that medical freedom prevails for all.

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Ladygrey
19 hours ago

Seems it should be the doctor’s prerogative and judgement to make these decisions.

0 0 Reply • Share ›

Ricky Ricardo
a day ago

We had a "standard of care" before 2020. After 2020, all the standards went out the window. It's been replaced with The Great Culling.

0 0 Reply • Share ›

jann
2 days ago

Dr. Sutton is the kind of doctor I would want - one who thinks for herself.

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